U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays availd OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 OTHER THAN CLAIMS AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) NUMBER FILED NUMBER EXTRA FOR RATE FEE RATE FEE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS X S = X S (37 CFR 1.16(c)) minus 20 = OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 X \$ OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR TOTAL OR TOTAL \* If the difference in column 1 is less than zero, enter "0" in column 2. CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY (Column 1) CL AIMS HIGHEST PRESENT RATE ADDI-RATE REMAINING NUMBER ADDI-**EXTRA** TIONAL TIONAL **PREVIOUSLY** RAFROMERT AFTER FEE FEE AMENDMENT PAIDFOR Minus Total (37 CFR 1.16(c)) X S ÓR X S Minus Independent (37 CFR 1.16(b)) x s = OR X S = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-**EXTRA** AFTER **PREVIOUSLY** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total Minus (37 CFR 1.16(c)) X \$ OR X \$ Independent (37 CFR 1.16(b)) Minus OR X \$ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE ADD'L FEE OR (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING PRESENT RATE ADDI-RATE ADDI-NUMBER PREVIOUSLY **EXTRA** TIONAL TIONAL ENDMENT **AFTER** PAID FOR AMENDMENT FEE FEE Minus Total (37 CFR 1.18(c)) OR Independent (37 CFR 1.16(b)) Minus X S X \$ OR ¥ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR + \$ TOTAL TOTAL ADD'L FEE OR ADD'L FEE \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

		Application or Docket Number									
PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999											
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN											
(Column 1) (Column 2)							MALL YPE	ENTITY	OR	OTHER SMALL	
FOR NUMBER FILED NUMBER					_	ATE	FEE	1	RATE	FEE	
ВА	SIC FEE							345.00	OR		690.00
ŢΟ	TAL CLAIMS	3	39 minus 20= · /9			×	X\$ 9=		OR	X\$18=	342
IND	EPENDENT CL	AJMS C	minus 3 = .* /			>	X39=		OR	X78=	78
MULTIPLE DEPENDENT CLAIM PRESENT						+	+130=		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2						T	OTAL -	,	OR	TOTAL	1110
CLAIMS AS AMENDED - PART II							OTHER THAN				
V	1610	(Column 1) CLAIMS	(Column 2) (Column 3)			SI	MALL	ENTITY	OR	SMALL	
ENT A		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	, A	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 32	Minus	-311	= /	Х	\$ 9=		OR	X\$18=	/
AME	Independent	• A	Minus	PENDENT CLAIM	-5	х	39=		OR	<del>×16</del> =	130
- 1	FIRST PRESE	NIATION OF R	OLTIPLE DEI	PENDENT CLAIR	<u>'                                     </u>	+1	30=		OR	+260=	
							TOTAL		OR	TOTAL	
4	(Column 1) (Column 2) (Column 3)					ADD	IT. FEE		J • · · ·	ADDIT. FEE	
-//		CLAIMS		HIGHEST	(Column 3)			ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	R	ATE	TIONAL FEE		RATE	TIONAL
NDN	Total	. 27	Minus	29	-	X	\$ 9=		OR	X\$18=	
AME	Independent	NTATION OF A	Minus	PENDENT CLAIM	=/	Х	39=		OR	X78=	
	. HOTT ALGE			CHUCH OUNIE		+1	30=		OR	+260=	
TOTAL ADDIT. FEE									OR	TOTAL	
10	110/14	(Caluma 4)		(Cal 0)	(Calum- O	ADD	ı. FEE'		, ,	ADDIT. FEE	
10	U I V I	(Column 1) CLAIMS	Contraction of the second	(Column 2) HIGHEST	(Column 3)			4001	1		400
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE	•	RATE	ADDI- TIONAL FEE
NDW	Total	. 15	Minus	- 39	=	X	\$ 9= ·		OR	X\$18=	•
ME	Independent	.4	Minus	••• 9 .	= /	X	39=			X78=	
_	FIRST PRESE	NTATION OF A	MULTIPLE DE	PENDENT CLAIM		<b>⊢</b>		<u> </u>	OR		<del>  </del>
	I the entry in each	mn 1 is less than	the entry in out	ırın 2, write "0" in ca	ohumn 3		30=		OR	+260=	
**	lf the "Highest Nur	mber Previously I	Paid For IN THI	S SPACE is less tha	an 20, enter "20."		TOTAL T. FEE		OR	TOTAL ADDIT, FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											